



DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below, next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

Reliable Broadcast Protocol in a Wireless Local Area Network

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the speci	fication of which			
_	V	is attached hereto.		
	L <u>X</u>	was filed on Decen		
			Number09/	
			ication Number	
		and was amended on	(if applicable)	•
as amend known or publication in public has not be country for than twel I acknow of Federa I hereby for patent	led by any amendment refer used in the United States on in any country before muse or on sale in the Unite een patented or made the storeign to the United States we months (for a utility particledge the duty to disclose all Regulations, Section 1.5 claim foreign priority benet or inventor's certificate li	erred to above. I do not known of America before my invention thereof or more and States of America more the subject of an inventor's certific of America on an application tent application) or six montall information known to me 6. Fifts under Title 35, United Stated below and have also ide	an one year prior to this applicate issued before the date of on filed by me or my legal rephas (for a design patent applicate be material to patentability	claimed invention was ever scribed in any printed solication, that the same was not cation, and that the invention this application in any resentatives or assigns more tion) prior to this application. The as defined in Title 37, Code One of any foreign application(s) lication for patent or
Prior For	eign Application(s):			
i	ADDLICATION	COLINITAL (OR	DATE OF FILING	DDIODITY CLAIMED
	APPLICATION NUMBER	COUNTRY (OR INDICATE IF PCT)	(day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
	NONIDER	INDICATE IF TCT)	(day, month, year)	No Yes
				□ No □ Yes
				□ No □ Yes
	claim the benefit under Tit al application(s) listed bel		ection 119(e) of any United S	tates
	APPLICATION NUMBER	FILING DATE		

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE	STATUS (ISSUED, PENDING, ABANDONED)
60/226,343	08/18/2000	pending

I hereby appoint the persons listed on Appendix A hereto (which is incorporated by reference and a part of this document) as my respective patent attorneys and patent agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

Send correspondence to:

George L. Fountain, Reg. No. 36,374, BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN, LLP

(Name of Attorney or Agent)

12400 Wilshire Boulevard, 7th Floor, Los Angeles, California 90025 and direct telephone calls to:

George L. Fountain, (714) 557-3800.

(Name of Attorney or Agent)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Full Name of Foundation For Inventor's Signature Inventor Signature Inventor's Signature Inve	ture (City , State) fth/Joint Inventor (given name, family name)	Date Citizenship (Country)	

APPENDIX A

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